

Substitute for form 1449/PTO (Revised 07/2005) INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)				Complete if Known		
				Application Number	10/675,584	
				Filing Date	September 30, 2003	
				First Named Inventor	Clark et al.	
				Group Art Unit	1731	
Examiner Name	Dionne Walls Mayes					
Sheet	1	of	1	Attorney Docket Number	030627/267409	
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Examiner Initials*	Cite No.	Document Number Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear	
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Examiner Signature				Date Considered	12-7-06	

*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.